



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/668,192
Applicant : Asher Sky
Filed : September 24, 2003
TC/A.U. : 3765
Examiner : Patel, T.
Confirmation No. : 4114
Docket No. : 1931.0003C
Customer No. : 27896
Title : COMBINED CONTAINER AND GARMENT
PROTECTION DEVICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed September 19, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 5 of this paper.

IFW

Attorney Docket No. 1931.0003C

PATENT APPLICATION



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of Asher Sky

Serial No.: 10/668,192

Examiner: Patel, Tajash D.

Confirmation No.: 4114

Art Unit: 3765

Filed: September 24, 2003

For: Combined Container and Garment Protector

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL OF RESPONSE

Enclosed are the following documents in response to the Office Action mailed
September 19, 2005 for the above-identified application:

- ☒ Amendment/Response (6 Pages)
- ☐ Petition for Extension of Time
- ☐ Request for Approval of Drawing Changes
- ☐ Information Disclosure Statement
- ☐ Notice of Appeal
- ☐ Associate Power
- ☐ Revocation and New Power
- ☐ Change of Address
- ☐ Return receipt postcard
- ☐ Other:

The fee has been calculated as follows:

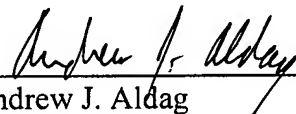
	NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	9	- 20 =	0	x \$50.00	0.00
Independent Claims	3	- 3 =	0	x \$200.00	0.00
If multiple dependent claims are presented, add \$360.00					
Total Amendment Fee					0.00
<input checked="" type="checkbox"/> Applicant claims Small Entity Status (subtract 50% of Total Application Fee)					
Other fees:					
TOTAL FEE DUE					\$0.00

- ☐ Check No. _____ in the amount of \$_____ for the total fee as calculated above.
- ☐ Please charge \$_____ to Deposit Account No. 05-0460 for the total fee. This paper is being submitted in duplicate.
- ☒ The Commissioner is hereby authorized to charge any additional appropriate fees that may be required by this paper, and to credit any overpayment, to Deposit Account No. 05-0460.

Dated: December 15, 2005
EDELL, SHAPIRO & FINNAN, LLC
CUSTOMER NO. 27896
 1901 Research Boulevard, Suite 400
 Rockville, MD 20850
 (301) 424-3640

Respectfully submitted by
EDELL, SHAPIRO & FINNAN, LLC

By:


 Andrew J. Aldag
 Reg. No. 40,483